Please type a plus sign in this box:	: +			PTO/SB/01 (3-97				
Inder the Paperwork Reduction Act	of 1995, no persons are re	Patent : quired to respond to a c	and Trademark O	ed for use through 6/30/98. OMB 0651-003: ffice; US DEPARTMENT OF COMMERCE nation unless it displays a valid OMB contro number				
DECLARAT	ION FOR	Attorney Do	cket No.	71486-0068				
UTILITY OR	DESIGN	First Named		Keith D. Foote				
PATENT APPI	LICATION		COMPLE	ETE IF KNOWN				
		Application N	0,					
□ Declaration	Declaration	Filing Date						
submitted with or	submitted after	Group Art Un	it					
initial filing	initial filing	Examiner Nar	ne					
As a below named inventor	, I hereby declare th	at:	·					
inventor (if plural names are on the invention entitled:	irst and sole inventor e listed below) of the	(only if one name subject matter whi	is listed below ich is claimed	y name. y) or an original, first and joint and for which a patent is sought				
V	ehicular Mirror v	with Improved B	earing Fit					
the specification of which	(T	itle of the Inventio	n)					
Number: I hereby state that I have reclaims, as amended by any a	and was ame viewed and understar amendment specifica	ended on and the contents of the cont	(if he above iden ve.	tified specification, including the				
Federal Regulations § 1.56.	sciose information w	hich is material to	patentability a	s defined in Title 37, Code of				
	ty benefits under Tit	le 35. United States	Code \$119 (a	a)-(d) of any foreign application(s)				
for patent or inventor's certi-	ficate, or § 365(a) of	any PCT internation	onal application	on which designated at least one				
country other than the United	d States of America,	listed below and ha	ve also identi	fied below, by checking the box.				
any foreign application for p	atent or inventor's co	ertificate, or of any	PCT internati	onal application having a filing				
date before that of the applica								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YY)	Priority Not Claim					
Additional foreign application n	umbers are listed on a sup	plemental priority data	sheer PTO/SB/02	B attached heroto:				
I horeby claim the benefit under Title	c 35, United States Code §	119(e) of any United St	ates provisional a	pplication(s) listed below.				
Application Number (s)	MM/DD/YY)		litional provisional application					
60/319,979		02/27/03		ibers are listed on a supplemental rity data sheet PTO/SB/02B				
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I hereby claim the benefit and America, listed below and, in matter provided by the first p 37, Code of Federal Regulatio application.	der Title 35, United S isofar as the subject n eragraph of Title 35, ons & 1.86 which book	States Code § i natter of each United States ame available	120 of any Unit of the slaims o is Codo §112, I c e botwoen tho fi	ited Sta of this d asknov	ance appl applicati	lication(s) of any li ion is not disclose the duty to disclos	PCT Intored in the property	mational apport of the Control of th	plication States of	r PCT Internati	ionel app ilicy us de	plication in the
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As a named inventor, I h	tereby appoint the	e following	registered	practi	tioner(s) to prosecute	this ap	nlication	and to	ransact all	hueines	a nerew,
Patent and Trademark O	office connected	therewith:	Custome	t Nur	mber 20)915	***************************************	prionici.	M10 10	Haiisavi u	JK2111~~	2 III IIIC
		Or				egistration num	ıber list	od below		Place Cust Number Bar Label H	r Code	
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John E. McGarry			2,360	G	J. Thor	mas Williams	-				,228	
Joel E. Bair		33	3,356	N	Aichael	l F. Kelly				•	859	
Mark A. Davis		3′	7,118									
Additional registered Direct all corresponde Name	ence to 🗵 Cu	istomer Ni Bar Code	umber Label		storod	Practitioner In	or			B/02C attach		
*	McGarry Ba	air PC										
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City, State, Zip	Grand Rapid	s, Michig	gan 49503	}								
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I hereby declare that all stateme statements were miled with the United States Code and that suc	knowledge that will	ful false sigton	monis and the li	iko 50 1	maco are	o punishable by fir	ine or impr	n and bolicf :	are belle or both, t	eved to be true:	And fluid	her that these litle 18 of the
Name of Sole or F	irst Invento	T	☐ A _J	petiti	ion h	as been filed	d for t	his unsi	gned	inventor.		
Given Name	e (first and mi	iddle [if a	W						×	Surname		
Keith D.					Foot	te		4				
Inventor's Signature	Kei	H &	Inste					D	ated	2/27	1/0	4
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City	Kentwoo	!	State	М		Zip	49508		1	ountry	US	
🗵 Additional inventors	are being named	i on the 1 s	supplements	l add	litional	inventor(s) s'	heet(a)	PTO/SB/C	02A at	tached here	to.	

Please type a plus sign in this box:

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Inventor's Signature Mod. Residence: City Allegan State MI Country US Post Office Address 2584 36th Street City Allegan State MI Zip 49010 Name of Inventor Given Name (first and middle [if any]) Benjamin D. Inventor's Signature Ruse Date Date Date Date Date Date Date	Citizenship Country US inventor	US			
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Given Name (first and middle [if any]) Family Name or					
Inventor's Signature Dated	i				
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